



TESTIMONY OF THE OFFICE OF THE CHILD ADVOCATE FOR THE STATE OF CONNECTICUT REGARDING SB 221, An Act CONCERNING PAID FAMILY And MEDICAL LEAVE

MARCH 8, 2016

Good morning, Representative Tercyak, Senator Gomes, Senator Hwang, Representative Rutigliano, and distinguished members of the committee. This testimony is submitted on behalf of the Office of the Child Advocate (OCA) in **support** of **SB 221, An Act Concerning Paid Family and Medical Leave**.

The primary statutory obligations of OCA include evaluation and reporting regarding the efficacy of publicly-funded child-serving systems throughout the state. OCA responds to daily calls for help regarding children with specialized needs. OCA also meets regularly with lawmakers, policy-makers and other stakeholders to review and advocate for policies and practices that will promote children's well-being and safety.

With the rise in women's labor force participation, particularly among mothers, there are increasing demands on both men and women to balance work and family responsibilities. The Federal Family and Medical Leave Act (FMLA) provides 12 weeks of unpaid leave from employment to care for a new child or ill family member. However, many families are unable to benefit from the job protection provided by FMLA because they cannot afford to take extended leave without pay.

One hundred and seventy-seven nations -- including Djibouti, Haiti and Afghanistan -- have laws on the books requiring that all women, and in some cases men, receive both income and job-protected time off after the birth of a child. But here, the Family and Medical Leave Act of 1993 provides only unpaid leave, and most working mothers don't get to stay home with their newborns for the 12 weeks allowed by the law. Many aren't covered by the FMLA; others can't afford to take unpaid time off. Some go back to work a few weeks after giving birth, and some go back after mere days.

Sharon Lerner, Washington Post, June 13, 2010

OCA supports SB-221 for the following reasons:

Paid leave has a positive impact on maternal and child health outcomes.

In the earliest months of life, children's brains grow at a dizzying pace, their primary relationships a laboratory for learning. Parental leave results in better prenatal and postnatal care which benefits a child's brain and social development. The American Academy of Pediatrics

and the American Public Health Association have recommended 3 months as the *minimum* age for enrolling healthy, full-term infants in child care, noting elevated risks to infant health and development in enrollment at earlier ages.

Research clearly shows that breastfeeding mothers who use paid leave substantially increase the length of time that they breastfeed their infants, compared to those who do not use or have access to leave. Infants benefit from the unrivaled protection of antibodies and nutrients in breastmilk versus formula. Moreover, as the baby matures, breast milk changes to meet the baby's needs and lowers the baby's risk of developing medical conditions including asthma, diarrhea and childhood leukemia.¹ Babies whose mothers immediately return to work after birth are not only less likely to be breastfed, they are also less likely to be current on immunizations and well-baby visits.

Mothers also reap a number of benefits from paid family leave. Research indicates that women who took at least 12 weeks of maternity leave reported fewer post-partum depressive symptoms.² Because a number of these women breastfeed their babies, they reduce the likelihood of developing life-threatening illnesses including breast cancer, ovarian cancer, type 2 diabetes and heart disease.³ Paid leave further facilitates the bonding process between mother and child which provides the baby's first model for intimate relationships and fosters a sense of security and positive self-esteem.

Paid leave increases the likelihood that a new mother will return to work after having a child.

Paid leave has been shown to increase the probability that women continue in their job after having a child, rather than quitting permanently.⁴ Not only does this save employers the expense of recruiting and training additional employees, it preserves the financial stability of the home.

Paid leave encourages men to take paternity leave and serve as caregivers to their newborns.

Children benefit when their fathers take paid leave to care for them. Paid leave has the potential to eliminate the stigma around women and men taking time off to be with newborns and family. Additionally, fathers who take 2 or more weeks of leave after the birth of their child are more involved in the child's direct care 9 months later than dads who do not take leave.⁵

¹ My Health, Connecticare Guidelines for Preventative Health. (March 7, 2016) .Retrieved from: <http://www.connecticare.com/member/healthmgmtcenter/maintainyourhealth/preventivehealth.aspx>

² Ragher RK, McGovern PM, Dowd BE. (December 2013). *Maternity leave duration and postpartum mental and physical health: implications for leave policies*. J Health Polit Policy Law; Retrieved from: <http://www.psychiatrictimes.com/postpartum-depression/longer-maternity-leave-benefits-women-postpartum-depression#sthash.ICcUe0Zf.dpuf>

³ My Health, Connecticare Guidelines for Preventative Health. (March 7, 2016). Retrieved from: <http://www.connecticare.com/member/healthmgmtcenter/maintainyourhealth/preventivehealth.aspx>

⁴ Rossin-Slater, M., Ruhm, C.J. & Waldfogel, J. (2013). *The effects of California's paid family leave program on mothers' leave-taking and subsequent labor market outcomes*. Journal of Policy Analysis and Management 32(2): 224-245

⁵ National Partnership for Women & Families, (June 2012) *Dad's Expect Better*, Retrieved from: http://www.working-families.org/network/pdf/Dads_Expect_June_2012.pdf

In Iceland, fathers are granted the longest nontransferable right to family leave in the world. In 2009, 96% of fathers in Iceland took paid family leave after the birth of their child for an average of 99 days. A subsequent study revealed that 70% of Icelandic fathers who took at least 3 months of leave continued to share child-rearing responsibilities 3 years after they returned to work.⁶

In 1990, Connecticut was one of the first states to pass legislation offering unpaid, job-protected leave to workers. Three years later, the Federal Government followed suit by passing the Federal Family and Medical Leave Act (FMLA). Proponents of this bill suggest that this legislation can be fully funded with low-cost employee contributions rather than imposing costs upon employers and the State. For this and all of the foregoing reasons, we urge the legislature to continue to set the tone for the rest of the country when it comes to paid family and medical leave.

Thank you again for the opportunity to submit this testimony.

Sincerely,

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⁶ Ásdís A. Arnalds, MA, PhD Guðný Björk Eydal, PhD Ingólfur V. Gíslason PhD, (December 2013) *Equal Rights to Paid Parental Leave and Caring Fathers-The Case of Iceland* Icelandic Review of Politics and Administration Vol. 9, Issue 2.